Headquarters U.S. Air Force

Integrity - Service - Excellence

Update: AFMS Lessons Learned

Lt Col Diane F. Lent-Tucker
AF Medical Lessons Learned
Air Force Medical Operations Agency

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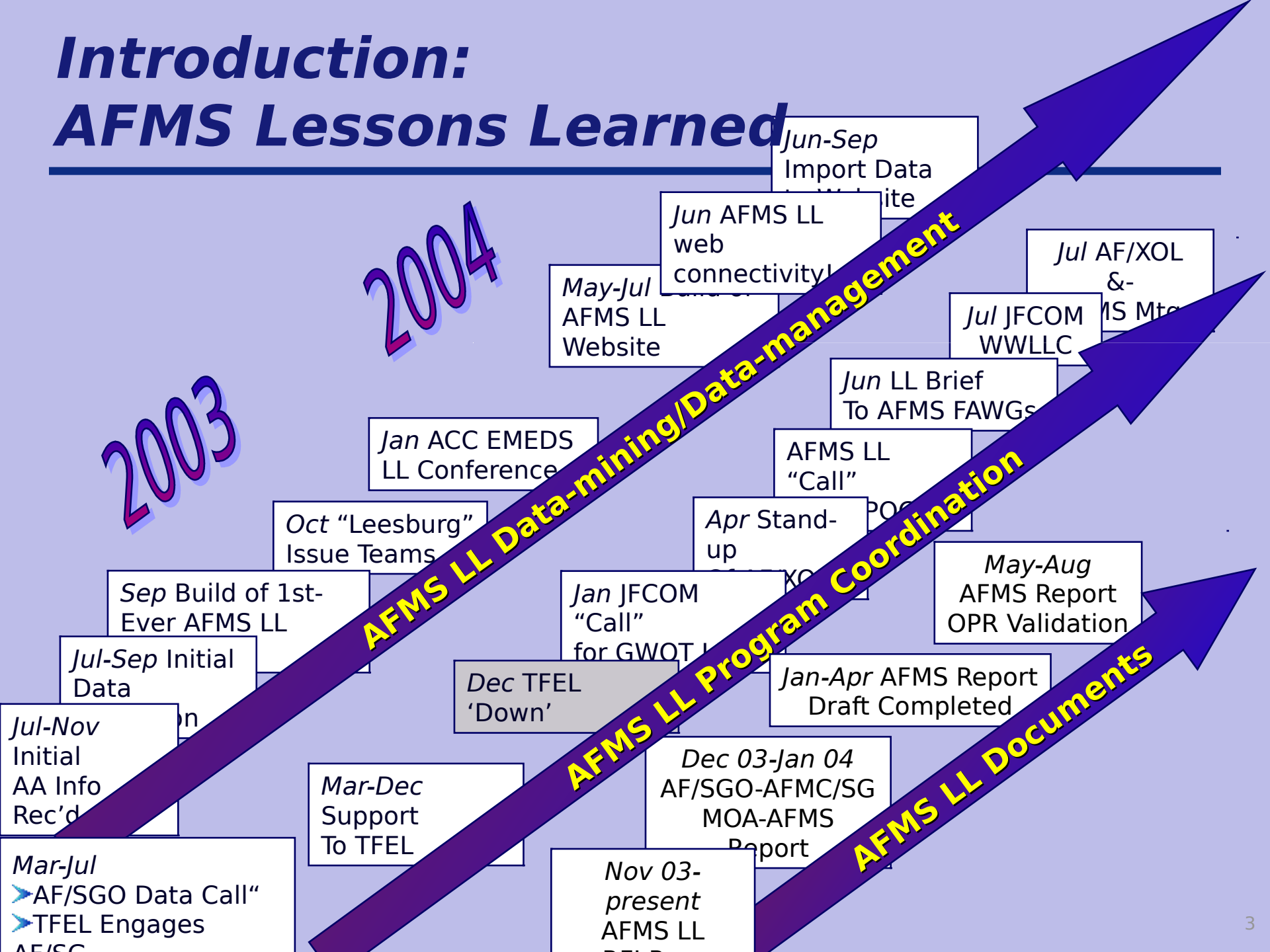
Overview

- Introduction
  - Timeline
  - Program Build/Products
- Looking back: "What have 'we' done with the lessons learned?"
- Looking forward…"Where are we heading?"
- Promoting Change from LL
  - Integration
    - MEFPAKs, FAWGs, Doctrine
- Closing

Introduction: AFMS Lessons Learned



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AFMS Lessons Learned: Program Build

- "Data Call 03" …The First Step
  - Request to 'field' for after-action information
  - Processing of reports
- Creating 'useable' information … The Second Step
  - Building the AFMS LL Database
- AFMS Lessons Learned … 'World' Tou
  - Task Force Enduring Look (TFEL)
  - "Leesburg '03"
  - World-Wide LL Conference '04
- LL Alliance
  - AF/XOL; JFCOM; HA; MEFPAKs
  - Functional Area Workgroups (FAWG)

UNITED STATES JOINT FORCES COMMAND
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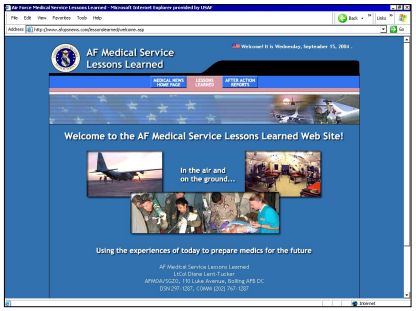
AFMS Lessons Learned: Establishing a Program

- **Information Sharing**
  - **AFMS connectivity – building it to last**
    - **The AFMS Lessons Learned Website!**
      - **http://www.afopsnews.com**
    - **AFMS Knowledge Exchange**
      - **Connectivity underway https://kx.afms.mil**
  - **The AFMS and AF connectivity with AF/XOL!**
    - **Permanent AF Lessons Learned post-TFEL**
      - **Manages AF Center for Knowledge Sharing Lessons Learned (AFCKSLL) https://afknowledge.langley.af.mil**
      - **Seeks/supports AFMS partner**
  - **MAJCOM/Agency LL POC Group**
  - **'RFI' Program**
  - **Formal 'Written' Reports**


AF Medical Service
Lessons Learned
Welcome to the AF Medical Service Lessons Learned Web Site!
In the air and on the ground...
Using the experiences of today to prepare medics for the future

Air Force Center for Knowledge Sharing Lessons Learned
AEW Commander's After Action Report
AEF Unit Commander's Summary Report
AEF 9/10 Individual Observations
AEF After Action Report Training Guide

"Coming Soon!" SG Lessons

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Looking back…
"What have 'we' done?"

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LL Trend Categories: The Constant

- Deployed Leaders
- Deployment Issues
- Information Management and Technology
- Deployed Medical Care
- Enlisted Issues
- Aeromedical Evacuation

Deployed Leaders

- **Issue: EMEDS/CCs with varying levels of qualification**
  - "Wing CCs desired 0-6/Physician/preferably FS as EMDG/CC.

    Previous CC/deployment/line experience beneficial."

Action: Leaders must be leaders!

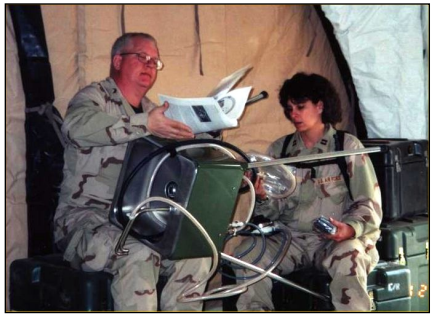
… but we can prepare them for th

- **Formal statement of qualifications**
  - EMEDS Mission Capability Statement (MISCAP): changed to reflect appropriate CC leadership
- **Current Training – updated and enhanc**
  - Medical Group Commanders' Course
  - Joint Operational Medical Manager's Course
- **Tools on the Street!**
  - Deployed Commanders' Handboo

Deployment Issues: Training

- **Issue: Many individuals deployed without adequate training**
  (UTC specific: EMEDS,CCATT,& PAM; RSVP; GEMS, TRAC2ES)
  - Training slots not readily available in training window
  - Attendance not mandatory; not SORTS repor
  - Not enough hands-on training

- **Recommendations:**
  - Re-look at formal training platforms
  - Reevaluate slots and availability during training cycle
  - Review RSV program



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Deployment Issues: EMEDS Training

- **Action:**
  - **Established EMEDS Formal Training Workgroup (FTWG)**
  - **Goal: ensure those tasked to deploy get <u>training priority</u>**
    - FTWG Conference - Jan 04
      - Attendance - All EMEDS training sites, MEFPAKs
      - Redefined processes, validated curriculum, identified shortfalls
  - **EMEDS Requirements drill completed i… May 04**
    - Identified number of personnel <u>requiring</u> trai…
    - Created additional slots at schoolhouses
  - **METL… by ME…**
    - Cur… date due … ETLS
    - Pre… S Training … ded Dec 04

Deployment Issues: UTC and RSVP Training

- **Action:**
  - **CCATT Sourcing Conference**
    - Built equitable slot distribution for MAJCOMs with CCA
  - **AECOT Requirements at MAJCOMs for coord**
    - Expect increased training courses/seats IAW requirements
  - **CASF F3 Aug 04**
    - MEFPAK (AMC) now has METLs underway
  - **PAM Contingency Course**
    - New/shorter course length to increase team training throughput
  - **RSVP**
    - **Training frequencies realigned with new AEF cycle**
  - **C-STARS schedules now centrally managed by AFEMSI**
    - PA and AFSOC tracks added to Baltimore sit
  - **TopSTAR**
    - **Now able to support 100% RSVP tng for 11 AFSCs over only 2wks**

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Deployment Issues: Logistics

- **Issue: Fragmented UTC deployment**
  - **Action: AF/SG study of OEF/OIF by AFLMA, Dec 03**
    - Recommended centralized storage
    - AFMSA/SGSL & SGPX, together with ACC & AM
      finalizing report on Consolidated WRM
      Deployment Centers
    - ACC and AMC Surgeons briefed 24-25 Aug 04
      - MAJCOM SG suggestions being incorporated

- **Issue: Patient oxygen problematic**
  - **Action: Develop new capability**
    - Expeditionary Deployable Oxygen Concentration Sy
      (EDOCS) fielded, added to EMEDS +10/+25
    - Mobile Oxygen Storage Tanks (MOST) replacing PTL
    - Mobile Oxygen Generation System (MOGS) being fielded for EMEDS Basic

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Deployment Issues: Logistics

Issue: Multiple UTC shortfalls

- **Action: Multiple**
  - In-garrison WRM maintenance vastly improved quality of equipment UTCs deployed in OI
  - New chapter in AFI 41-209, *Medical Logistics Sup* provides guidance on improving UTC readiness
  - AFMSA/SGSLX is expanding DLA contingency support contracts allowing units quick procurement of UTC shortfalls prior to deployment

Issue: Re-alignment of dental EMEDS capability

- **Action: ACC MEFPAK evaluating issue**
  - Moving +10 dental capability to the Basic
  - Moving EP2 dentist to separate UTC
  - Expeditionary Dental Clinic, dental equipment being reviewed for possible development

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Deployment Issues: Logistics

- **Issue: Timely equipment repair & calibration**

- **Action: Multiple**
  - ACC MEFPAK evaluating test equipment for EMEDS Basic
  - SIMLM biomedical equipment repair capability now operational
  - Loaner Repair and Return Centers now at Ramstein, Yokota ABs exchange 'serviceable for unserviceable' critical equipment

- **Issue: SIMLM responsiveness; low airlift priority**

- **Action: DoD Executive Agent (EA) for Medical Materiel**
  - Services to proactively plan with COCOMs and address OIF L/L
  - EA funding of theater distribution centers to ensure early resupply
  - Modeling tools to improve development of capabilities-based UTCs and Joint product standardization
  - Collaboration between DLA and USTRANSCOM's Deployment Distribution Operation Center to imp theater distribution

Deployment Issues: Logistics

- **Issue: Poor In-transit Visibility (ITV) throughout theater**
  - **Action: Multiple**
    - **AFMSA/SGSL working with DLA and DMLSS program office to implement RFID technology**
      - Demonstration project at WRM industrial ops site, Kelly USA
    - **Consolidated WRM Storage and Deployment Centers**
      - ↓ the number of 'nodes' and thus ↑ ITV
    - **TRANSCOM established the Deployment Distribution Operations Center (DDOC) in CENTCOM to improve ITV**

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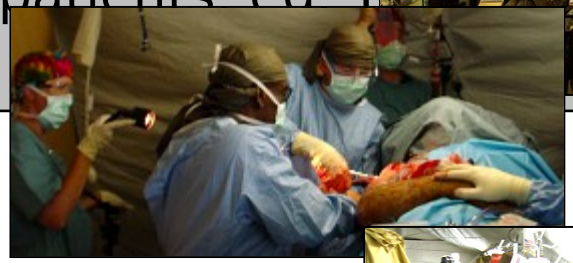
Information Management and Technology

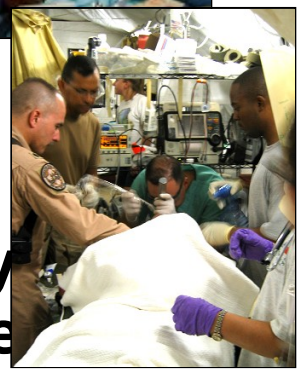
- **Issue: "IMIT unreliable and inconsistently used"**

- **Action: Multiple initiatives**
  - **GEMS**
    - Maintenance/upgrades made IAW clinician/user
    - EMEDS Training designated GEMS 'classroom' with training divided into AFSC-related groups; comprehensive GEMS exercise and evening rotations for more 'hands-on'
  - **TRAC2ES**
    - Reengineering underway IAW LL
    - 'Basic' training by TRANSCOM, Sheppard MRFTS
      - Training benefits AECOT, CASF, EMEDS courses
    - To be added into EMEDS tng in same style as GEMS
  - **TMIP**
    - EMEDS to address in the Future… "Train the trainer"

Deployed Medical Care

- **Issue: "Medical-surgical patient acuity and volume not always a match to caregiver availability and skill set"**
- **Background:**
  - Under-utilization of skills at some locations
  - Concern over training/prep for 'sick' patients, eg, T
  - May be 'trained' but skills not tasked





- **Action:**
  - **UTC Refinements**
  - **'Hub-and-Spoke' concept**
  - **ACC Operational Clinical Outcomes WG**
  - **Training programs and RSVP updated by Consultants and CFM IAW lessons learne**

Enlisted Issues: Leadership

- **Issue: No First Sergeant (FS) or Medical Chief on EMEDS**
  - FS shortage AF-wide/no UTC space prevents EMEDS assignment
  - No Medical Chief 4X000 billet on any deployable UTC

Action:

- **Mandatory attendance to Wing "Under-Shirt" Program for all MSgts/SMSgts assigned to deployable UTC's**
  - Creates pool of "Undershirts" ready to serve as FS
  - Make part of pre-deployment training

- **Relatively low number of enlisted medics deployed do not justify assigning Medical Chief**
  - Enlisted Medics do not deploy in numbers similar to LAF
  - Source Medical Chiefs on case by case basis

Aeromedical Evacuation

- **Issue: Need to communicate all AE changes *to* AE and ground medical forces, as well as line & Joint Communities**
  - Many deployed forces were unclear of C2, doctrine

Action: Focused training

- Short Term: AMC/A33E developed a 3-day AE Leadership Orientation to the deploying Command Elements CCATT and CASF leadership
- Long Term: Formal training course for AE leadership; highly structured AE leadership orientation to educate AE Command & Control Ele[illegible]

Aeromedical Evacuation

- **Issue: AE-specific planner needed at component level to perform theater planning**
  - No AE planning function at CENTAF Forward
  - Lack of AE during ops planning delayed “reactive” planning
- **Action:**
  - Ongoing discussion at AMC regarding what should constitute an “AE planner”
    - COA includes ‘R’ prefix individual; AE assignment
    - Lack of readiness career path = No development of readiness planners; critically difficult to recruit
  - Need to rekindle dialogue with CENTAF/SG on way-ahead

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Aeromedical Evacuation

- **Issue: Many CCATTs unfamiliar with AE operations**
  - Confusion of roles/responsibilities in the field
- **Action: Since last year - situation improved greatly!**
  - Great SG/A3 network
  - Senior CCATTs included in AMC AE Ldrship Orientation; organizational structure now includes CCATT Director
  - CCATTs now attend AECOT, and [illegible]t Readiness Training exercises
- **Coming Up:**
  - CCATT U&TW Oct 04 at Brooks
  - CCATT AFI underway

Aeromedical Evacuation

- **Issue: AE assets (personnel & equipment) unable to get lift back to AOR…resulted in decreased support to combat ops**

Action: AF leading the way in utilization/execution of joint interoperabi tri-service PMI system

- Theater-level PMI “center” established at As Sal
- Army now trained on PMI tracking and management
- Users trained on 8-day equipment rotation to support patient regulation
- Issue included in reference materials and AE Ldrship Orientation; AMC/SGSL briefs at AE Ldrship Orientation
- 5 AE equipment hubs now within CONUS & OCONUS

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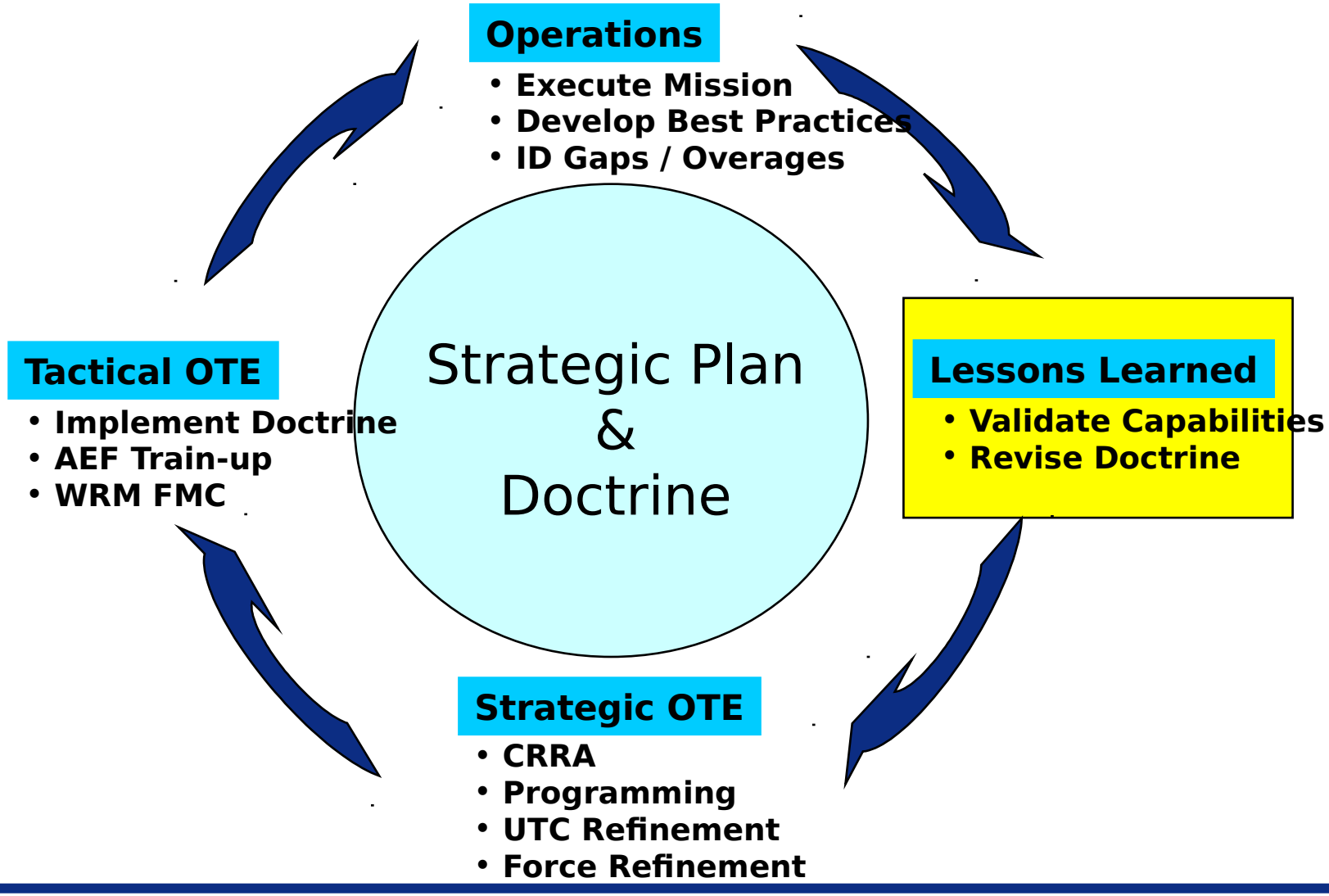
Looking forward

Lessons Learned… and the Organize/Train/Equip Cycle



After Action Information → AF/SG Consolidation → OPRs/ FAWGS

AFMS Ops

OPRs/ FAWGS → DOTMLPF Analysis → AFMS CRRA

PRIORITIZED SOLUTIONS

Planning Horizon	Near-Term	Mid-Term	Future
Doctrine	X	X	X
Organization			
Training	X		
Materiel			X
Leadership			
Personnel	X		X
Facilities		X	

Assigned OPRs

Tracked on Kx LL Website (SGOZ)

From Lessons Learned… on to DOTMLPF Prioritized, Synchronized, Integrated Solutions

TTPs

POM

Modernization

UTC Refinement

Strategic Plans

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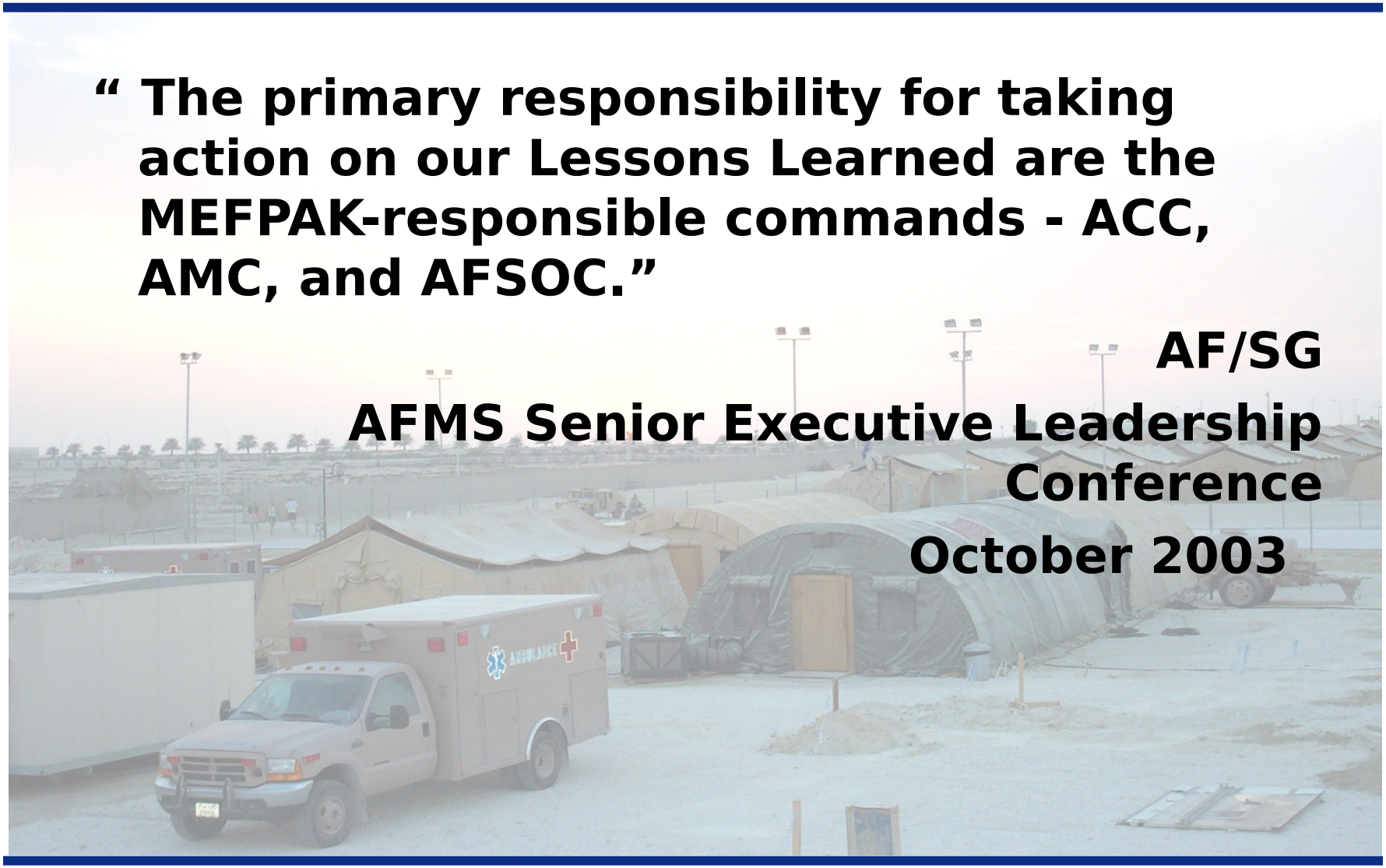
Closing



“ The primary responsibility for taking action on our Lessons Learned are the MEFPAK-responsible commands - ACC, AMC, and AFSOC.”

AF/SG

AFMS Senior Executive Leadership Conference

October 2003

Headquarters U.S. Air Force

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Air Force Medical Service Lessons Learned

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